

**EXECUTIVE LOBBYING  
SUPPLEMENTAL REGISTRATION FORM**

**Instructions**

1. Print in ink or type.  
2. Complete form and return to Board of Ethics, 2415 Quail Dr., 3<sup>rd</sup> Floor, Baton Rouge LA 70808, or fax to (225) 763-8787. For information or assistance, call (225) 763-8777 or (800) 842-6630. No fee is required.  
3. This form must be submitted within 5 days of any changes in your registration form or to add employers or those you represent. It must be submitted within 10 days of any termination of employment or representations.

**FOR OFFICE USE ONLY**

Postmark Date: 8-20-08

*Supp*

*ack*

**3072075**

1. NAME Peere Markey W  
Last First MI

NAME  
CHANGE \_\_\_\_\_  
Last First MI

2. BUSINESS PHONE 318 - 675-0116  
(Area Code) Phone Number

3. FAX PHONE 318-675-0117

4. BUSINESS ADDRESS 401 Market Street Ste 550 Shreveport LA 71101  
Street and No. City State Zip

MAILING ADDRESS Same  
Street and No. City State Zip

5. EMPLOYER Southern Strategy Group-NLA

6. EMPLOYER'S ADDRESS 401 Market Street Ste 550 Shreveport LA 71101  
Street and No. City State Zip

7. Have you ceased or terminated all lobbying activities requiring registration? Yes \_\_\_\_\_ No X

8. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1) Name Cash America International, Inc.  
Address 11200 West 7th Street, Fort Worth TX 76102  
Business or purpose paid and pawn lending



New Representation

Does this person pay you? NO

If No, who pays you?

Southern Strategy Group-NLA, LLC



Terminated Representation as of \_\_\_\_\_

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- 2) Name General Scrap Yard  
Address 200 North Mc Neil Street Shreveport, LA 71101  
Business or purpose Recycling  
☒ New Representation  
Does this person pay you? NO  
If No, who pays you? Southern Strategy Group-LLA, LLC  
☐ Terminated Representation as of \_\_\_\_\_

- 3) Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
☐ New Representation  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_  
☐ Terminated Representation as of \_\_\_\_\_

**CERTIFICATION OF ACCURACY**

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

*Marky H. Rene*  
Signature of Lobbyist